

Petition No.

Tax Map No.

Certified Cashiers Receipt:

1st Step Mtg Date:





APPLICATION—CITY PLAN BOARD—TEXT AMENDME Planning & Development Services

OFFICE USE ONLY
Fee: \$

EZ Fee: \$

Receipt No.

Account No. 001-660-6	680-1124 (Enterprise Zone) []	
II .	680-1125 (Enterprise Zone Credit [1
N	f A!	
	f Applicant/Agent (Please print or ty)	De)
Applicant/Agent Name: City	Plan Board	
Applicant/Agent Address:		
City: Gainesulle	75.66	
State: FL	Zip: 32601	
Applicant/Agent Phone:	Applicant/Agent Fax:	7
Dean Minnis, AKP:	334-5022. FAX: 33	4-2648
Gainesville Code of Ordinances (Land Department of Community Developme	intending to file a petition for a text amend Development Code) or to the Comprehens nt prior to filing the petition, in order to dibe evaluated as applicable to the particula TEXT AMENDMENT	ive Plan, meet with the scuss the proposed amendment
Check applicable request below:	TEXT MILETONIAN (
Land Development Code []	Comprehensive Plan Text	Other []
Section/Appendix No.:	Element & Goal, Objective or Policy No.:	
	Table 14: 5-4ea-Schedu	vent. & of Capital Improvement
Proposed text language and/or exp	planation of reason for request (use ad	ditional sheets, if necessary):
Update the 5-4ear	rements Element of	The Gamesite

Phone: 352-334-5022

TL—djw 8/99

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(4) (3)	
No person submitting an application may rely upon any comment concerning a proposed amendment, or any expression of any nature about the proposal made by any participant at the pre-application conference as a representation or implication that the proposal will be ultimately approved or rejected in any form.	
CERTIFICATION	
The undersigned has read the above application and is familiar with the information submitted herewith. Signature of applicant/agent: Dleu L A C P	

Phone: 352-334-5022